

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1	1						51		
2		1					52		
3		1					53		
4		3					54		
5	1						55		
6		1					56		
7		1					57		
8		3					58		
9	1						59		
10		1					60		
11		1					61		
12		3					62		
13		1					63		
14	1						64		
15		1					65		
16		1					66		
17		3					67		
18	1						68		
19	1						69		
20	1						70		
21	1						71		
22	1						72		
23	1						73		
24	1						74		
25	1						75		
26	1						76		
27	1						77		
28		2					78		
29		2					79		
30		2					80		
31		2					81		
32		2					82		
33	1						83		
34		1					84		
35		1					85		
36		1					86		
37		1					87		
38		1					88		
39		1					89		
40	1						90		
41	1						91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	17						TOTAL IND.		
TOTAL DEP.	37						TOTAL DEP.		
TOTAL CLAIMS	54						TOTAL CLAIMS		